

<i>SERFF Tracking Number:</i>	<i>UNUM-125780830</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Unum Life Insurance Company of America</i>	<i>State Tracking Number:</i>	<i>40032</i>
<i>Company Tracking Number:</i>	<i>NAIC</i>		
<i>TOI:</i>	<i>LTC03G Group Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03G.001 Qualified</i>
<i>Product Name:</i>	<i>Group Long Term Care</i>		
<i>Project Name/Number:</i>	<i>NAIC /</i>		

Filing at a Glance

Company: Unum Life Insurance Company of America

Product Name: Group Long Term Care

TOI: LTC03G Group Long Term Care

Sub-TOI: LTC03G.001 Qualified

Filing Type: Form/Rate

SERFF Tr Num: UNUM-125780830 State: ArkansasLH

SERFF Status: Closed

Co Tr Num: NAIC

Co Status:

Author: Jay Burt

Date Submitted: 08/21/2008

State Tr Num: 40032

State Status: Approved-Closed

Reviewer(s): Harris Shearer

Disposition Date: 10/14/2008

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: NAIC

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 10/14/2008

State Status Changed: 10/14/2008

Corresponding Filing Tracking Number:

Filing Description:

August 19, 2008

Status of Filing in Domicile: Authorized

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Small and Large

Group Market Type: Employer

Deemer Date:

Julie Benafield Bowman

Commissioner of Insurance

State of Arkansas

Department of Insurance

SERFF Tracking Number: UNUM-125780830 State: Arkansas
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TOI: LTC03G Group Long Term Care Sub-TOI: LTC03G.001 Qualified
Product Name: Group Long Term Care
Project Name/Number: NAIC /

1200 West 3rd Street
Little Rock AR 72201-1904

RE: Unum Life Insurance Company of America
Group Long Term Care
NAIC #416-62235 FEIN #01-0278678
G.PA.NAIC06, Policy Amendment
G.CR.NAIC06, Certificate Rider
7608-04-2, Things You Should Know
AE-7000, Potential Rate Increase Disclosure Form
Addendum to Actuarial Memorandum/Certification
Rates

Dear Commissioner Benafield Bowman:

Enclosed please find a Policy Amendment, Certificate Rider, and consumer disclosure forms for your review and approval. These forms apply to our GLTC04 and RGLTC04 policies, approved by your department on June 1, 2004.

The intent of the filing is to comply with Arkansas Long Term Care Insurance Rule 13, effective July 1, 2008, and also to revise certain other provisions for clarification purposes.

Items 9 through 12 of the Policy Amendment and Certificate Rider describe Accelerated Payment Options. They have been revised by the addition of a new contingent nonforfeiture provision required for policies with a fixed premium payment period. The only difference between the Accelerated Payment Options is the duration of the premium payments. We are including an Addendum to the Actuarial Memorandum and rates, currently on file, for the new contingent nonforfeiture provision. We respectfully request non-disclosure of this information, if your Department grants it. There are no other changes that impact rates already on file.

For policies issued on or after July 1, 2008 but prior to approval, the Policy Amendment and Certificate Rider will be delivered. The boxed Accelerated Payment Option provisions (items 9 through 12) will be in or out depending on the Policyholder's plan. For policies issued after approval, the changes in the Policy Amendment and Certificate Rider will be incorporated within the policy.

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Things You Should Know form # 7608-04-2 replaces form # 7608-04, approved on June 1, 2004. The only difference between the forms is the form number itself. We changed it for internal system reasons.

Potential Rate Increase Disclosure Form # AE-7000 is new and will be used for policies effective on or after July 1, 2008. It differs from # 7602-04, previously approved on December 1, 2004 the new form includes a "reduced paid-up contingent nonforfeiture benefit" for coverage with fixed or limited premium payment periods. The new form complies with Arkansas Long Term Care Insurance Rule 13.

Thank you in advance for your attention to our filing. Please feel free to contact me if you have questions or need additional information. I can be reached by phone at: 207-575-5738; or by email at: jburt@unum.com.

Sincerely,

Jay K. Burt
Senior Contract Analyst
Long Term Care Contract Compliance & Filing

Enc.

Company and Contact

Filing Contact Information

Jay Burt, Senior Contract Analyst	jburt@unum.com
2211 Congress Street	(207) 575-5738 [Phone]
Portland, ME 04122	(423) 209-3499[FAX]

Filing Company Information

Unum Life Insurance Company of America	CoCode: 62235	State of Domicile: Maine
2211 Congress Street	Group Code: 416	Company Type: L&H
Portland, ME 04122	Group Name:	State ID Number:

<i>SERFF Tracking Number:</i>	<i>UNUM-125780830</i>	<i>State:</i>	<i>Arkansas</i>
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(207) 575-2211 ext. [Phone]

FEIN Number: 01-0278678

SERFF Tracking Number:	UNUM-125780830	State:	Arkansas
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Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	Rates and Forms = \$50.00
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Unum Life Insurance Company of America	\$50.00	08/21/2008	22062972

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor (FM)	10/14/2008	10/14/2008

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Disposition

Disposition Date: 10/14/2008

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: UNUM-125780830 State: Arkansas

Filing Company: Unum Life Insurance Company of America State Tracking Number: 40032

Company Tracking Number: NAIC

TOI: LTC03G Group Long Term Care Sub-TOI: LTC03G.001 Qualified

Product Name: Group Long Term Care

Project Name/Number: NAIC /

Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Supporting Document	Outline of Coverage	Approved-Closed	Yes
Supporting Document	Actuarial Certification	Approved-Closed	No
Supporting Document	Actuarial Certification Exhibit 1	Approved-Closed	No
Supporting Document	Actuarial Certification Exhibit 2	Approved-Closed	No
Supporting Document	Actuarial Certification Exhibit 3	Approved-Closed	No
Form	Potential Rate Increase Disclosure Form	Approved-Closed	Yes
Form	Things You Should Know Before You Buy Long Term Care Insurance	Approved-Closed	Yes
Rate	APO Rates	Approved-Closed	Yes

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Form Schedule

Lead Form Number: AE-7000

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	AE-7000	Other	Potential Rate Increase Disclosure Form	Revised	Replaced Form #: 7602-04 Previous Filing #:		AE-7000.pdf
Approved-Closed	7608-04-2	Other	Things You Should Know Before You Buy Long Term Care Insurance	Revised	Replaced Form #: 7608-04 Previous Filing #:		7608-04-2 Things You Should Know.pdf



**Group Long Term Care Insurance
Potential Rate Increase Disclosure Form**

1. **Premium Rate:** The premium rate sheet that is applicable to you and that will be in effect until a request is made and filed / approved for an increase (depending on state law or regulation) can be found in your enrollment kit.
2. **The premium for your coverage will be shown on your schedule of benefits or confirmation of coverage, whichever is applicable.**
3. **Premium Rate Adjustments:** Any change in premium rate will be effective on the group policy anniversary date.
4. **Potential Rate Revisions: Your coverage is Guaranteed Renewable.** This means that the rates for your coverage may be increased in the future. Your rates can NOT be increased due to your increasing age or declining health, but your rates may go up based on the experience of all policyholders with a policy similar to the one under which you have coverage.

If you receive a premium rate increase in the future, you will be notified of the new premium amount and you will be able to exercise at least one of the following options:

- Pay the increased premium and continue your coverage in force as is.
- Reduce your coverage benefits to a level such that your premiums will not increase. (Subject to state law minimum standards.)
- Exercise your non-forfeiture option if purchased. (This option may be available for purchase for an additional premium.)
- Exercise your contingent non-forfeiture rights.*

***Contingent Non-Forfeiture**

If the premium rate for the group policy under which your coverage is written goes up in the future and the policy does not include non-forfeiture as a standard provision or you didn't buy a non-forfeiture option, you may be eligible for contingent non-forfeiture. If your coverage includes a contingent non-forfeiture provision, here is how to tell if you are eligible:

You will keep some long-term care insurance coverage, if:

- (a) Your premium after the increase exceeds your original premium by the percentage shown (or more) in the following table; and
- (b) You lapse (not pay more premiums) within 120 days of the increase;

The amount of coverage (i.e. new lifetime maximum benefit amount) you will keep will equal the total amount of premiums you have paid since your certificate of coverage was first issued. If you have already received benefits under the group policy, so that the remaining maximum benefit amount is less than the total amount of premiums you have paid, the amount of coverage will be that remaining amount.

Except for this reduced lifetime maximum benefit amount, all other policy benefits will remain at the levels attained at the time of the lapse and will not increase thereafter.

Should you choose this contingent non-forfeiture option your coverage with this reduced maximum benefit amount will be considered “paid up” with no further premiums due.

Example: You bought this coverage at age 65 and paid the \$1,000 annual premium for 10 years, so you have paid a total of \$10,000 in premium. In the eleventh year, you receive a rate increase of 50%, or \$500 for a new annual premium of \$1,500, and you decide to lapse your coverage (not pay any more premiums). Your paid-up benefits are \$10,000 (provided you have at least \$10,000 of benefits remaining under your coverage).

Cumulative Premium Increase over Initial Premium that qualifies for Contingent Non-Forfeiture.

Percentage increase is cumulative from date of original issue. It does NOT represent a one-time increase.

Issue Age	Percent Increase Over Initial Premium	Issue Age	Percent Increase Over Initial Premium
29 and under	200%	72	36%
30-34	190%	73	34%
35-39	170%	74	32%
40-44	150%	75	30%
45-49	130%	76	28%
50-54	110%	77	26%
55-59	90%	78	24%
60	70%	79	22%
61	66%	80	20%
62	62%	81	19%
63	58%	82	18%
64	54%	83	17%
65	50%	84	16%
66	48%	85	15%
67	46%	86	14%
68	44%	87	13%
69	42%	88	12%
70	40%	89	11%
71	38%	90 and over	10%

If your coverage is under a policy effective on or after July 1, 2008 and includes a 5 – Year; 10 – Year; To Age 65; or The Greater of 10 Years or to Age 65 Accelerated Payment Option provision, in addition to the contingent non-forfeiture benefits described above, the following reduced “paid-up” contingent non-forfeiture benefit is an option even if you selected a non-forfeiture benefit when you purchased your coverage. If both the reduced “paid-up” benefit AND the contingent benefit described above are triggered by the same rate increase, you can chose either of the two benefits.

You are eligible for the reduced “paid-up” contingent non-forfeiture benefit when all three conditions shown below are met:

1. The premium you are required to pay after the rate increase exceeds your original premium by the same percentage or more shown in the chart below:

TRIGGERS FOR A SUBSTANTIAL PREMIUM INCREASE -

Issue Age	Percent Increase Over Initial Premium
Under 65	50%
65 – 80	30%
Over 80	10%

2. You stop paying your premiums within 120 days of when the premium increase took effect; AND
3. The ratio of the number of months you already paid premiums is 40% or more than the number of months you originally agreed to pay.

If you exercise this option, your coverage will be converted to a reduced “paid-up” status. This means there will be no additional premiums required. Your benefits will change in the following ways:

- (a) The total lifetime amount of benefits your reduced “paid-up” coverage will provide can be determined by multiplying 90% of the lifetime benefit amount at the time the coverage becomes “paid-up” by the ratio of the number of months you already paid premiums to the number of months you agreed to pay them.
- (b) The monthly benefit amounts you purchased will also be adjusted by the same ratio.

If you purchased lifetime benefits, only the monthly benefit amounts you purchased will be adjusted by the applicable ratio.

Example:

- You bought the coverage at age 65 with an annual premium payable for 10 years.
- In the sixth (6th) year, you receive a rate increase of 35% and you decided to stop paying premiums.
- Because you have already paid 50% of your total premium payments and that is more than the 40% ratio, your “paid-up” coverage benefits are .45 (.90 times .50) times the total benefit amount that was in effect when you stopped paying your premiums. If you purchased inflation protection, it will not continue to apply to benefits in the reduced “paid-up” coverage.



Unum Life Insurance Company of America
2211 Congress Street
Portland, Maine 04122

Things You Should Know Before You Buy Long Term Care Insurance

Long Term Care Insurance	<ul style="list-style-type: none">• A long term care insurance policy may pay most of the costs for your care in a nursing home. Many policies also pay for care at home or other community settings. Since policies can vary in coverage, you should read this policy and make sure you understand what it covers before you buy it.• You should not buy this insurance policy unless you can afford to pay the premiums every year. Remember that the company can increase premiums in the future.• The personal worksheet includes questions designed to help you and the company determine whether this policy is suitable for your needs.
Medicare	<ul style="list-style-type: none">• Medicare does not pay for most of long term care.
Medicaid	<ul style="list-style-type: none">• Medicaid will generally pay for long term care if you have very little income and few assets. You probably should not buy this policy if you are now eligible for Medicaid.• Many people become eligible for Medicaid after they have used up their own financial resources by paying for long term care services.• When Medicaid pays your spouse's nursing home bills, you are allowed to keep your house and furniture, a living allowance and some of your joint assets.• Your choice of long term care services may be limited if you are receiving Medicaid. To learn more about Medicaid, contact your local and state Medicaid agency.
Shopper's Guide	<ul style="list-style-type: none">• Make sure the insurance company or producer gives you a copy of a booklet called the National Association of Insurance Commissioners' "Shoppers Guide to Long Term Care Insurance". Read it carefully. If you have decided to apply for long term care insurance, you have the right to return the policy within 30 days and get back any premium you have paid if you are dissatisfied for any reason or choose not to purchase the policy.
Counseling	<ul style="list-style-type: none">• Free counseling and additional information about long term care insurance are available through your state's insurance counseling program. Contact your state insurance department or department on aging for more information about the senior health insurance counseling program in your state.
Facilities	<ul style="list-style-type: none">• Some long term care insurance contracts provide for benefit payments in certain facilities only if they are licensed or certified, such as in assisted living centers. However, not all states regulate these facilities in the same way. Also, many people move into a different state from where they purchased their long term care policy. Read the policy carefully to determine what types of facilities qualify for benefit payments, and to determine that payment for a covered service will be made if you move to a state that has a different licensing scheme for facilities than the one in which you purchased the policy.

Unum is a registered trademark and marketing brand of Unum Group and its insuring subsidiaries.

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Rate Information

Rate data does NOT apply to filing.

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Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved-Closed	APO Rates	GLTC04, RGLTC04	New		APO Rates - GLTC04 National.pdf

Unum Life Insurance Company of America

TABLE APO

Accelerated Payment Option (APO)

Issue Age	Single Premium	5 -Year	10 - Year	To Age 65	Yrs / To Age 65
30	42.93	8.86	4.91	2.22	2.22
31	42.29	8.76	4.86	2.22	2.22
32	41.80	8.65	4.81	2.22	2.22
33	41.60	8.55	4.74	2.22	2.22
34	40.71	8.42	4.67	2.22	2.22
35	40.19	8.31	4.61	2.23	2.23
36	39.41	8.18	4.55	2.23	2.23
37	38.72	8.06	4.47	2.24	2.24
38	38.43	7.94	4.41	2.24	2.24
39	37.63	7.81	4.34	2.25	2.25
40	36.52	7.57	4.21	2.26	2.26
41	35.79	7.41	4.13	2.27	2.27
42	35.38	7.27	4.04	2.28	2.28
43	34.60	7.10	3.95	2.29	2.29
44	33.78	6.93	3.85	2.30	2.30
45	32.96	6.76	3.76	2.32	2.32
46	32.25	6.60	3.68	2.33	2.33
47	31.74	6.50	3.62	2.34	2.34
48	30.35	6.25	3.49	2.35	2.35
49	29.07	6.13	3.42	2.38	2.38
50	28.58	5.85	3.27	2.39	2.39
51	27.09	5.54	3.10	2.40	2.40
52	25.69	5.26	2.96	2.42	2.42
53	24.89	5.16	2.90	2.51	2.51
54	24.10	5.04	2.84	2.63	2.63
55	23.31	4.92	2.77	2.77	2.77
56	22.66	4.81	2.71	2.99	2.71
57	22.09	4.69	2.65	3.24	2.65
58	21.54	4.58	2.58	3.59	2.58
59	20.86	4.45	2.52	4.06	2.52
60	20.30	4.22	2.39	4.22	2.39
61	19.05	3.95	2.25	4.66	2.25
62	17.88	3.80	2.18	6.05	2.18
63	17.11	3.71	2.13	9.08	2.13
64	16.59	3.60	2.08	17.42	2.08
65	16.10	3.44	2.01	202.86	2.01
66	15.37	3.31	1.94	193.66	1.94
67	14.66	3.21	1.89	184.72	1.89
68	14.15	3.11	1.84	178.29	1.84
69	13.62	3.00	1.80	171.61	1.80
70	13.10	2.82	1.69	165.06	1.69
71	12.36	2.71	1.64	155.74	1.64
72	11.56	2.61	1.60	145.66	1.60
73	11.01	2.52	1.56	138.73	1.56
74	10.53	2.43	1.52	132.68	1.52
75	10.07	2.30	1.46	126.88	1.46
76	9.45	2.16	1.42	119.07	1.42
77	8.73	2.08	1.39	110.00	1.39
78	8.29	2.00	1.35	104.45	1.35
79	7.88	1.92	1.32	99.29	1.32
80	7.45	1.85	1.30	93.87	1.30
81	7.04	1.77	1.28	88.70	1.28
82	6.64	1.71	1.26	83.66	1.26
83	6.26	1.65	1.25	78.88	1.25
84	5.90	1.59	1.23	74.34	1.23
85	5.57	1.50	1.21	70.18	1.21
86	5.19	1.45	1.20	65.39	1.20
87	4.88	1.42	1.19	61.49	1.19
88	4.60	1.38	1.18	57.96	1.18
89	4.40	1.34	1.18	55.44	1.18
90	4.22	1.31	1.17	53.17	1.17
91	4.03	1.28	1.17	50.78	1.17
92	3.88	1.25	1.16	48.89	1.16
93	3.79	1.23	1.16	47.75	1.16
94	3.75	1.22	1.14	47.25	1.14
95	3.72	1.21	1.14	46.87	1.14
96	3.65	1.19	1.14	45.99	1.14
97	3.54	1.17	1.13	44.60	1.13
98	3.49	1.16	1.13	43.97	1.13
99	3.44	1.13	1.13	43.34	1.13
100	3.39	1.12	1.12	42.71	1.12

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Supporting Document Schedules

Satisfied -Name:	Certification/Notice	Review Status:	Approved-Closed	10/14/2008
Comments:				
Attachment:				
Certificate of Compliance AR Rule and Reg 19.pdf				
Bypassed -Name:	Application	Review Status:	Approved-Closed	10/14/2008
Bypass Reason:	Not Applicable			
Comments:				
Bypassed -Name:	Outline of Coverage	Review Status:	Approved-Closed	10/14/2008
Bypass Reason:	Not Applicable			
Comments:				

Certificate of Compliance with Arkansas Rule and Regulation 19

Insurer: Unum Life Insurance Company of America

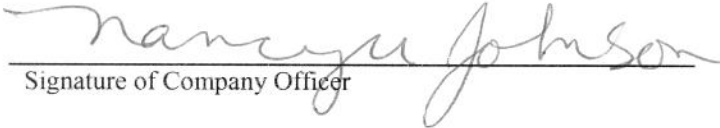
Form Number(s): G.PA.NAIC06, Policy Amendment

G.CR.NAIC06, Certificate Rider

7608-04-2, Things You Should Know

AE-7000, Potential Rate Increase Disclosure Form

I hereby certify that the filing above meets all applicable Arkansas requirements including the requirements of Rule and Regulation 19.



Signature of Company Officer

Nancy H. Johnson

Name

Vice-President Contract, Compliance & Filing

Title

August 19, 2008

Date